ENTRY BLANK
PLEASE TYPE OR PRINT Entered previous May Show
☐ yes 🖾 no
Mr. Artist (Last Name Last)
Permanent
Tel. () Area Code
Temporary
AddressStreet City
Tel. ()
Zip Area Code
Permanent address is in what county?
Born in Cuyahoga County 🖂 Yes 🖂 No
Collaborator(If Any)
If May Show entries are not accepted or not sold: Artist will pick up at Museum. Museum should dispose of. Museum should ship to artist C.O.D. at this address:
Special Instructions When necessary include below instructions or a drawing of how the object is to be assembled and displayed.
AFORINED 1- 24-77 EX
G Town

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until January 2, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature____

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